| Fill in this information to identify your case: | | |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERNDistrict of _ILLINOIS(State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Identify Yourself | | |
|--------------------|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your | full name | | |
| goverr identifi | the name that is on your nment-issued picture ication (for example, river's license or | Lavern First name Phyllis | First name |
| passp | | Middle name | Middle name |
| identifi | your picture ication to your meeting le trustee. | Shatteen Last name | Last name |
| with the | ic trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All ot | her names you | | |
| | used in the last 8 | First name | First name |
| | e your married or n names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| your | the last 4 digits of Social Security | xxx - xx - <u>9310</u> | XXX - XX |
| Individ | er or federal dual Taxpayer fication number | OR | OR |
| | | 9 xx - xx | 9 xx - xx |

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Document Shatteen Phyllis Lavern Debtor 1 Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|---|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in | | I have not used any business names or EINs. | I have not used any business names or EINs. | | |
| | the last 8 years | Business name | Business name | | |
| | Include trade names and doing business as names | Business name | Business name | | |
| | | EIN | EIN | | |
| | | EIN | EIN | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 429 Dante Avenue Number Street | Number Street | | |
| | | Glenwood IL 60425 City State ZIP Code | City State ZIP Code | | |
| | | COOK | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. | | |
| | | Number Street | Number Street | | |
| | | P.O. Box | P.O. Box | | |
| | | City State ZIP Code | City State ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 | | |
| | | | | | |
| | | | | | |
| | | | | | |

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Document Shatteen Phyllis Lavern Debtor 1 Case Number (if known)

| Pa | Tell the Court About Your | Bankruptcy | Case | | | | |
|-----|---|---|---|--------------------------|----------------------|--|--|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | Bankrup ter 7 ter 11 ter 12 | | | equired by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box. | |
| 8. | How you will pay the fee | local yours subm with a I nee Appli I requ By la less t pay tl | I pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee self, you may pay with cash, cashier's check, or money order. If your attorney is nitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address. In the fee in installments. If you choose this option, sign and attach the dication for Individuals to Pay The Filing Fee in Installments (Official Form 103A). In the fee in installments is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the Application to Have the loter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No □ Yes. | District | None None | When | Case Number MM / DD / YYYY Case Number MM / DD / YYYY Case Number | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No | District Debtor | | When | Relationship to you Case Number, if known MM / DD / YYYY Relationship to you Case Number, if known MM / DD / YYYY | |
| 11. | Do you rent your residence? | ■ No. □ Yes. | resider | our landlord obtainence? | Statement About an E | ent against you and do you want to stay in your Eviction Judgment Against You (Form 101A) and file it with | |

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Document Shatteen Phyllis Lavern Debtor 1 Case Number (if known)

| | rt 3: Report About Any Busine | | • | | | |
|-----|---|-----------------|---|--------------------------------------|----------------|--------------|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. □ Yes. | Go to Part 4. Name and location of busines | s | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | _ |
| | a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it | | Number Street | | | _ |
| | to this petition. | | City | | State Zip Code | |
| | | | Check the appropriate box to | describe vour business: | • | |
| | | | _ | us defined in 11 U.S.C. § 101(27A)) | | |
| | | | ☐ Single Asset Real Estate | e (as defined in 11 U.S.C. § 101(51B |)) | |
| | | | ☐ Stockbroker (as defined | in 11 U.S.C. § 101(53A)) | | |
| | | | ☐ Commodity Broker (as o | efined in 11 U.S.C. § 101(6)) | | |
| | | | ☐ None of the above | | | |
| | debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | ☐ No. | he Bankruptcy Code. | I am NOT a small business debtor a | - | ı |
| Pa | Report if You Own or Ha | ve Any Hazard | ous Property or Any Property Th | at Needs Immediate Attention | | |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and | No. | What is the hazard? | | | |
| | indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is neede | d, why is it needed? | | |
| | | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | | |
| | perishable goods, or livestock that must be fed, or a building | | Where is the property?Numb | er Street | | |
| | perishable goods, or livestock that must be fed, or a building | | | er Street | | |

Debtor 1

Phyllis Lavern

Document Shatteen

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Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

> If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|
| You must check one: | You must check one: |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |

I am not required to receive a briefing about

| credit counseling because of: | | | | | | |
|-------------------------------|--|--|--|--|--|--|
| ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | | | | |
| Disability. | My physical disability causes me | | | | | |

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. rational decisions about finances.

Incapacity. I have a mental illness or a mental

I am not required to receive a briefing about

credit counseling because of:

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

deficiency that makes me incapable of realizing or making

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Lavern Phyllis Document Shatteen P

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Case Number (if known)

| Pa | rt 6: Answer These Questions | for Reporting Purposes | | | | |
|-----|--|---|--|--|--|--|
| 16. | you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. | | | | | |
| | | Yes. Go to line 17. 16c. State the type of debts you o | owe that are not consumer debts or business o | debts. | | |
| 17. | Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution | | napter 7. Go to line 18. ter 7. Do you estimate that after any exempt per are paid that funds will be available to distril | | | |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | |
| 19. | How much do you estimate your assets to be worth? | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. | How much do you estimate your liabilities to be? | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| Pa | rt 7: Sign Below | | | | | |
| For | you | correct. If I have chosen to file under Chap of title 11, United States Code. I ur under Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with | I declare under penalty of perjury that the info oter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap did not pay or agree to pay someone who is re- d read the notice required by 11 U.S.C. § 342 the chapter of title 11, United States Code, spenent, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for und 3571. | e, under Chapter 7, 11,12, or 13 oter, and I choose to proceed not an attorney to help me fill out (b). pecified in this petition. | | |
| | | ★ /s/ Lavern Phyllis Shate Signature of Debtor 1 Executed on 09/26/2016 MM / DD | Signa Execu | uted onMM / DD / YYYY | | |

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| Debtor 1 | Lavern | Phyllis | Shatteen | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |
| | | | | |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Christopher Michael Dyer | Date | Date: 09/29/2 | 016 |
|------------------------------------|-----------|----------------|------------|
| Signature of Attorney for Debtor | 24.0 | MM / DD / YYYY | / |
| Christopher Michael Dyer | | | |
| Printed name | | | _ |
| Geraci Law L.L.C. | | | _ |
| Firm name | | | _ |
| 55 E. Monroe St., #3400 | | | |
| Number Street | | | |
| Chicago | IL | 60603 | _ |
| City | State | ZIP Code | - |
| Sity | Otate | Zii Gode | |
| Contact Phone312-332-1800 | Email add | dressndil@gera | acilaw.con |
| Contact Phone 312-332-1800 6308928 | Email add | dressndil@gera | acilaw.con |

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| Fill in this information to identify your case: | | | | | | |
|---|------------|---|---------------------|--|--|--|
| Debtor 1 | Lavern | Phyllis | Shatteen | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| | | for the : <u>NORTHERN</u> District of _ | ILLINOIS (State) | | | |
| Case Number (If known) | | | _ | | | |
| (II Kilowii) | | | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: | Summarize Your Assets | |
|----------|--|--------------------------------------|
| | | Your assets Value of what you own |
| 1a. Copy | e A/B: Property (Official Form 106A/B) y line 55, Total real estate, from Schedule A/B y line 62, Total personal property, from Schedule A/B | \$ 0 \$ 141,051 |
| | y line 63, Total of all property on <i>Schedule A/B</i> | \$ 141,051 |
| Part 2: | Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) v the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$148,599 |
| За. Сору | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$0 \$49,888 |
| | • | |
| Part 3: | Summarize Your Liabilities | |
| | e <i>I: Your Income</i> (Official Form 106I) our combined monthly income from line 12 of <i>Schedule I</i> | \$4,383.97 |
| | e <i>J: Your Expenses</i> (Official Form 106J) our monthly expenses from line 22c of <i>Schedule J</i> | \$3,767.00 |

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Debtor 1 Lavern Phyllis Shatteen Case Number (if known)

First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,893.62 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$ 0.00

9g. Total. Add lines 9a through 9f.

| Fill in this in | Caso 16 21 formation to identify yo | | | Entered 09/30/16 1 0 of 65 | L8:31:02 I | Desc N | ∕lain | |
|---|--|--|--|---|--------------------------------------|---------------|----------------------------|--------------|
| | Lavern | Phyllis | Shatteen | | | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States | Bankruptcy Court for the : _ | NORTHERN District | _ | | | | | |
| Case Number | | | (State) | | | | heck if this | is an |
| (If known) | | | | | | ar | mended fili | ng |
| | orm 106A/B | | | | | | | |
| Schedul | e A/B: Prope | rty | | | | | | 12/15 |
| category where esponsible for pages, write you Part 1: | you think it fits best. B supplying correct infor ur name and case numb Describe Each Residence | e as complete and ac mation. If more space per (if known). Answe , Building, Land, or Ott | curate as possible. If two mar e is needed, attach a separate er every question. ner Real Esate You Own or Have | | , both are equally | , | | |
| 01. Do you ow No. | n or have any legal or e | equitable interest in a | ny residence, building, land, o | or similar property? | | | | |
| Yes. | Describe | | | | | | | |
| | | | What is the property? Check | all that apply. | Do not deduct see | | • | |
| 429 Dante | | agrintion | Single-family home Duplex or multi-unit building | | Creditors Who Ha | - | | |
| Street addre | ess, if available, or other des | scription | Condominium or cooperativ | | Current value of | f the | Current va | lue of the |
| | | | Manufactured or mobile hor | | entire property? | ? | portion you | u own? |
| Glenwood | I | IL 60425 | Land | | s 116, | ,231.00 | \$ | 116,231.00 |
| City | • | State ZIP Code | Investment property | | • | | * | |
| | | | Timeshare | | Describe the na | ture of yo | ur ownersh | ip |
| County | | | Other | | interest (such a | s fee simp | ole, tenancy | by |
| | | | Who has an interest in the p | roperty? Check one. | the entireties, o | r a life esta | at), if knowi | n. |
| | | | Debtor 1 only | | | | | |
| | | | Debtor 2 only | | | | | |
| | | | Debtor 1 and Debtor 2 only | | Check if this (see instruct | | munity pro | perty |
| | | | At least one of the debtors a | | · | , | | |
| | | | Other information you wish to property identification number | to add about this item, such as per: | s local | | | |
| 2 Add the doll | lar value of the portion | you own for all of you | ur entries fro Part 1, including | any entries for nages | | | | |
| | • | • | | puges | | | | \$116,231.00 |
| Part 2: | Describe Your Vehicles | | | | | | | , |
| Do you own, le | ease, or have legal or ec | quitable interest in an | y vehicles, whether they are r | registered or not? Include any | vehicles | | | |
| - | - | | • | cutory Contracts and Unexpired | d Leases. | | | |
| No. | s, trucks, tractors, sport | utility vehicles, moto | orcycles | | | | | |
| Yes. | Describe lake: | Ford | Who has an interest in the p | roperty? Check one. | Do not deduct sec | cured claims | or exemption | ns Put |
| | lodel: | Explorer | Debtor 1 only | · • | the amount of any | y secured cla | aims on Sche | edule D: |
| | ear: | 2013 | Debtor 2 only | | Creditors Who Ha | | | |
| | | 33,000 | Debtor 1 and Debtor 2 only | | Current value of entire property? | | Current val portion you | |
| | pproximate Mileage: | 00,000 | At least one of the debtors a | and another | | | | |
| 0 | Other information: | | Check if this is commun | nity property (see | \$20 | 0,850.00 | \$ | 20,850.00 |
| | | | instructions) | inty property (acc | | | | |
| | | |] | | | | | |

Case 16-31423 Lavern

Doc 1

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Desc Main

Debtor 1

04.

First Name Middle Name Filed 09/30/16

Shatteen
Document
Last Name

| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories | |
|--|--------------|
| Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories | |
| No. | |
| Yes. Describe | |
| dd the dollar value of the portion you own for all of your entries fro Part 2, including any entries for pages | |
| ou have attached for Part 2. Write that number here | \$ 20,850.00 |
| 24 11410 414401104 101 1 411 21 111110 1144 11411001 11010 111010 11010 111110 1114 1114110 11141 11141 11141 | |

| | | - | portion you own for all of your entries fro Part 2, including any entries for pages | \$ 20,850.00 |
|-----|------------------------|--|--|--|
| 3 | ou have att | ached for Part 2 | 2. Write that number here> | |
| F | art 3: | escribe Your Per | sonal and Household Items | |
| Do | you own or | have any legal | or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 06. | Examples: No. | | ilshings urniture, linens, china, kitchenware | |
| | Yes. | Describe | Furniture, linens, small appliances, table & chairs, bedroom set \$1,800 | \$1,800.00 |
| 07. | | Televisions and rac | lios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games | |
| | Yes. | Describe | Flat screen TV, computer, printer, music collection, cell phone \$500 | \$ 500.00 |
| 08. | | Antiques and figuri | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles | , |
| | Yes. | Describe | | \$0.00 |
| 09. | Examples: | for sports and I Sports, photograph ; carpentry tools; m | ic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| | Yes. | Describe | Golf clubs \$750 | \$ 750.00 |
| 10. | Firearms Examples: | Pistols, rifles, shotg | uns, ammunition, and related equipment | |
| | Yes. | Describe | | \$0.00 |
| 11. | Examples: | Everyday clothes, f | urs, leather coats, designer wear, shoes, accessories | |
| | Yes. | Describe | Everyday clothes \$300 | \$ <u>300.0</u> 0 |
| 12. | Examples: gold, silver | Everyday jewelry, c | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | Yes. | Describe | Everyday jewelry, costume jewelry \$300 | \$ <u>300.0</u> 0 |
| 13. | Non-farm a Examples: | i nimals Dogs, cats, birds, h | orses | |
| | Yes. | Describe | | \$ 0.00 |

Debtor 1 Lavern

Case 16-31423

Doc 1

Entered 09/30/16 18:31:02 Page 12 of 55 Humber (if known)

Desc Main

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| First Name | Middle Name | Last Name | 1 age 12 of 00 | | |
|--------------------------------|---------------------------|--------------------------------|------------------------------|-------|-------------|
| 14. Any other personal and h | ousehold items you did n | ot already list, including any | health aids you did not list | | |
| Yes. Describe | Books, CDs, DVDs & Famil | y Photos | | \$100 | \$ 100.0 |
| 15 Add the dollar value of all | of your entries from Part | 3 including any entries for r | nages you have attached | | |

| | Yes. | Describe | Books, CDs, DVDs & Family Pho | tos | \$100 | |
|-----|-----------------------------|--|---|---|----------|---|
| | | | | | | \$ <u>100.0</u> 0 |
| | | | | cluding any entries for pages you have attached | | \$3,750.00 |
| | for Part 3. V | write that numi | oer nere | > | | |
| F | Part 4: | escribe Your Fi | nancial Assets | | | |
| Do | you own or | have any legal | or equitable interest in any of | f the following? | , | Current value of the cortion you own? Do not deduct secured claims or exemptions |
| 16. | Cash Examples: No. Yes. | Money you have in | n your wallet, in your home, in a safe | e deposit box, and on hand when you file your petition | | |
| 17 | Deposits of | f monov | | | | \$0 <u>.0</u> 0 |
| 17. | Examples: 0 | Checking, savings | s, or other financial accounts; certific If you have multiple accounts with the Account Type: | rates of deposit; shares in credit unions, brokerage houses, he same institution, list each. Institution name: | | |
| | . 00. | Doddingo | Savings Account | Chase | | \$20.00 |
| | | | Checking Account | Chase | | \$200.00 |
| 40 | Daniela | | blick. And do do ake also | | | \$220.00 |
| 18. | | | publicly traded stocks tment accounts with brokerage firms | s, money market accounts | | |
| | Yes. | Describe | Institution or issuer name: | | | \$ 0.00 |
| 19. | Non-public No. Yes. | | and interests in incorporated Name of Entity and Percent of | and unincorporated businesses, including an interest in fownership: | | <u></u> |
| | _ | | | | | \$0.00 |
| 20. | Negotiable i Non-negotia | instruments includ able instruments a | de personal checks, cashiers' checks are those you cannot transfer to som | and non-negotiable instruments s, promissory notes, and money orders. neone by signing or delivering them. | | |
| | Yes. | Describe | Issuer name: | | | \$ 0.00 |
| 21. | | or pension aco | | savings accounts, or other pension or profit-sharing plans | | · |
| | Yes. | Describe | Type of account and Institution | n name: | | |
| 22. | Security de | posits and pre | pavments | | | \$ <u>0.0</u> 0 |
| | Your share | of all unused depo | osits you have made so that you ma | y continue service or use from a company s (electric, gas, water), telecommunications | | |
| | Yes. | Describe | Institution name or individual: | | | |
| 23. | Annuities (| A contract for a | a periodic payment of money t | to you, either for life or for a number of years) | | \$0.00 |
| | Yes. | Describe | Issuer name and description: | | | |
| 24. | 26 U.S.C. § | | IRA, in an account in a qualifie (b), and 529(b)(1). | ed ABLE program, or under a qualified state tuition program. | | \$ <u>0.0</u> 0 |
| | No. Yes. | Describe | Institution name and description | on. Separately file the records of any interests.11 U.S.C. § 521(c): | | \$0.00 |

Debtor 1 Lavern

Case 16-31423

Doc 1

First Name

Middle Name

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| 25. | No. | | interests in property (other than anything listed in line 1), and rights or powers | | | |
|-----|---------------------------------|-----------------------|---|---|-----------------------|--------|
| | Yes. | Describe | | , | \$ | 0.00 |
| 26. | | | narks, trade secrets, and other intellectual property mes, websites, proceeds from royalties and licensing agreements | | <u> </u> | |
| | Yes. | Describe | | | ¢ | 0.00 |
| 27. | | | other general intangibles cclusive licenses, cooperative association holdings, liquor licenses, professional licenses | | , | |
| | Yes. | Describe | | | \$ | 0.00 |
| Mor | ney or prop | erty owed to you | 1? | Current val portion you Do not deduc or exemptions | own? t secured cla | aims |
| 28. | Tax refund | ls owed to you | | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 29. | Examples: | • | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement | | | |
| | Yes. | Describe | | , | \$ | 0.00 |
| 30. | Examples: Social Section No. | urity benefits; unpai | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else | | | |
| | Yes. | Describe | | : | \$ | 0.00 |
| 31. | | | es r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary: | | | |
| | Yes. | Describe | Term life insurance policy | 50 | \$ | 0.00 |
| 32. | If you are the | | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive s died. | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 33. | _ | - | s, whether or not you have filed a lawsuit or made a demand for payment nent disputes, insurance claims, or rights to sue | | | |
| | Yes. | Describe | | , | \$ | 0.00 |
| 34. | Other cont | | uidated claims of every nature, including counterclaims of the debtor and rights | | | - |
| | Yes. | Describe | | ! | \$ | 0.00 |
| 35. | Any financ | cial assets you d | id not already list | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| | | | of your entries from Part 4, including any entries for pages you have attached | [| \$2 | 220.00 |
| | | | | | | |

Official Form 106A/B

Case 16-31423 Lavern

Yes.

Describe.....

Doc 1

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Document Page 14 of 5 umber (if known)

Desc Main

0.00

Debtor 1

First Name Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Yes. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... Yes. 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No.

Debtor 1 Lavern | Case 16-31423 | Doc 1 | Filed 09/30/16 | Entered 09/30/16 18:31:02 | Desc Main | Phyllis | Doc 1 | Filed 09/30/16 18:31:02 | Desc Main | Page 15 of 65 | Doc 1 | Page 15 of 65 | Desc Main | Page 15 of 65 | Des

| | First Name | Wildlie Name Last Name | | | | |
|--------------|------------------------------------|---|---------------------|--------------|---|-----------------|
| 50. | Farm and fishing supplies, | chemicals, and feed | | | | |
| | Yes. Describe | | | | | |
| 51. | Any farm- and commercial | fishing-related property you did not alre | ady list | | | \$ <u>0.0</u> 0 |
| | No. | | | | | |
| | Yes. Describe | | | | | \$0.00 |
| | | of your entries from Part 6, including any | | - | > | \$0.00 |
| P | art 7: Describe All Prope | erty You Own or Have an Interest in That Yo | ou Did Not List Abo | ove | | |
| 53. | Examples: Season tickets, cou | y of any kind you did not already list? ntry club membership | | | | |
| | No. Yes. Describe | | | | | |
| | _ | | | | | \$0.00 |
| 54. | Add the dollar value of all o | of your entries from Part 7. Write that nu | mber here | | > | \$0.00 |
| P | art 8: List the Totals of I | Each Part of this Form | | | | |
| 55. I | Part 1: Total real estate, line | e 2 | | | | \$ 116,231.00 |
| 56. I | Part 2: Total vehicles, line s | 5 | | \$ 20,850.00 | | |
| 57. l | Part 3: Total personal and I | nousehold items, line 15 | | \$ 3,750.00 | | |
| 58. l | Part 4: Total financial asset | s, line 36 | | \$ 220.00 | | |
| 59. l | Part 5: Total business-relat | ed property, line 45 | | \$ 0.00 | | |
| 60. I | Part 6: Total farm- and fishi | ng-related property, line 52 | | \$ 0.00 | | |
| 61. I | Part 7: Total other property | not listed, line 54 | | \$ 0.00 | | |
| 62. | Гotal personal property. Ad | d lines 56 through 61 | | \$ 24,820.00 | | \$ 24,820.00 |
| | | | | | | |
| 63. | Total of all property on Sch | edule A/B. Add line 55 + line 62 | | | | \$141,051.00 |
| | | | | | | _ _ |

| Fill in this in | nformation to ident | ify your case: | |
|---------------------|----------------------|-------------------------------------|-----------------|
| Debtor 1 | Lavern | Phyllis | Shatteen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | r | | (State) |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B that lists this property Copy the value from Schedule A/B that lists this property Copy the value from Schedule A/B that lists this property Copy the value from Schedule A/B that lists this property Check only one box for each exemption The exemption of the exemption of the exemption schedule A/B that lists this property The exemption of the property and line on Schedule A/B that lists this property Check only one box for each exemption Check only one box for each exemption The exemption of the exemption of the exemption on the portion you claim on the property of the exemption you claim on the portion you claim schedule A/B that lists this property The exemption you claim on the property of the exemption you claim you | Part 11 Identify the Property You Claim as Exempt | | | | | | | | | | | |
|---|---|-----------------|-------------------|---------------------------------------|------------------------------------|--|--|--|--|--|--|--|
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption Schedule A/B Check only one box for each exemption C | 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | | | | | | |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Brief 429 Dante Avenue Glernwood IL description: 60425 - Primary Residence \$ 116,231 \$ \$ 15,000 \$ | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) | | | | | | | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Brief description: 69425 - Primary Residence | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Brief description: 69425 - Primary Residence \$ 116,231 \$ 15,000 Line from Schedule A/B 01 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$1,800.00 Brief description: 429 Dante Avenue Gienwood IL description: 69425 - Primary Residence \$ 116,231 \$ 15,000 735 ILCS 5/12-901 - \$15,000.00 Line from Schedule A/B: 01 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(c) - \$2,400.00 Line from Schedule A/B: 03 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$1,800.00 Brief Furniture, linens, small appliances, table & chairs, bedroom set \$ 1,800 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$1,800.00 Brief Golf clubs 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable statutory limit 735 ILCS 5/12-1001(b) - \$750.00 \$ 100% of fair market value, up to any applicable st | | | | | | | | | | | | |
| Schedule A/B that lists this property Copy the value from Schedule A/B Brief 429 Dante Avenue Glenwood IL description: 60425 - Primary Residence \$116,231 \$\$ 15,000 \$ Line from Schedule A/B: 01 \$\$ 15,000 \$ Brief 2013 Ford Explorer with over description: 33,000 miles \$\$ 2,400 \$ Line from Schedule A/B: 03 \$\$ 2,400 \$ Brief 408 Check only one box for each exemption of the control of the contr | 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | | | | |
| Schedule A/B | | | | Amount of the exemption you claim | Specific laws that allow exemption | | | | | | | |
| description: 60425 - Primary Residence \$ 116,231 | | | | Check only one box for each exemption | | | | | | | | |
| Schedule A/B: 01 Brief 2013 Ford Explorer with over description: 33,000 miles \$ 20,850 | | | \$ <u>116,231</u> | \$15,000 | 735 ILCS 5/12-901 - \$15,000.00 | | | | | | | |
| description: 33,000 miles \$ 20,850 | | 01 | | — | | | | | | | | |
| Schedule A/B: 03 any applicable statutory limit Brief Furniture, linens, small appliances, description: table & chairs, bedroom set \$1,800 \$\$ Line from Schedule A/B: 06 any applicable statutory limit Brief Golf clubs \$750 \$\$ Line from \$100% of fair market value, up to any applicable statutory limit The from \$100% of fair market value, up to any applicable statutory limit The from \$100% of fair market value, up to any applicable statutory limit The from \$100% of fair market value, up to any applicable statutory limit | | • | \$_ 20,850 | \$2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 | | | | | | | |
| description: table & chairs, bedroom set \$ 1,800 | | 03 | | — | | | | | | | | |
| Schedule A/B: 06 any applicable statutory limit Brief Golf clubs 4750 \$\frac{735 \text{ ILCS 5/12-1001(b) - \$750.00}}{100% \text{ of fair market value, up to}} | | | \$1,800 | \$ | 735 ILCS 5/12-1001(b) - \$1,800.00 | | | | | | | |
| description: \$\ \\$_750 \\ \Bigs_s \\ \B | | 06 | | | | | | | | | | |
| | | Golf clubs | \$ <u>750</u> | \$ | 735 ILCS 5/12-1001(b) - \$750.00 | | | | | | | |
| | | 09 | | _ | | | | | | | | |
| | | | | | | | | | | | | |
| Official Form 106C Record # 716081 Schedule C: The Property You Claim as Exempt Page 1 or | Official Form 106C | Record # 716081 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 | | | | | | | |

Debtor 1 Lavern Phyllis Document Page 17 of 65 ase Number (if known)

First Name Additional Page

Additional Page

| Part 2: Addit | ional Page | | | |
|-------------------------|--|--------------------------------------|---|--------------------------------------|
| | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Everyday clothes | \$_300 | \$ | 735 ILCS 5/12-1001(a),(e) - \$300.00 |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday jewelry, costume jewelry | \$_300 | \$ | 735 ILCS 5/12-1001(a),(e) - \$300.00 |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Books, CDs, DVDs & Family Photos | \$_100 | \$ | 735 ILCS 5/12-1001(a) - \$100.00 |
| Line from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Savings Account, Chase, 20.00 | \$_20 | \$ | 735 ILCS 5/12-1001(b) - \$20.00 |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Checking Account, Chase, 200.00 | <u>\$_200</u> | | 735 ILCS 5/12-1001(b) - \$200.00 |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| 3. Are you claimin | g a homestead exemption of more | than \$155,675? | | |
| (Subject to adjust | stment on 4/01/16 and every 3 years | after that for cases filed o | n or after the date of adjustment .) | |
| No. | | | | |
| □ No | acquire the property covered by the | e exemption within 1,215 d | lays before you filed this case? | |
| ☐ Yes. | | | | |
| | | | | |
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| | | | | |
| | | | | |
| Official Form 1060 | Record # 716081 | 0-1-1-0-7 | he Property You Claim as Evemnt | Page 2 of 2 |

| Fill in this in | Caso 16 | | c 1 Filad 00/20/16 | Entered 09/30/1 8 of 65 | .6 18:31:02 | Desc Main | |
|---------------------------------|-------------------------------------|----------------------------|---|-----------------------------|--|--|--------------------------------|
| | | iany your outor | | 0 01 05 | | | |
| Debtor 1 | Lavern | Phyllis | Shatteen | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> | District of <u>ILLINOIS</u> | | | | |
| Case Number | r | | (State) | | | Check if this | s is an |
| (If known) | | | | | | amended fi | ling |
| Official F | orm 106D | | | | | | |
| Schedule | D: Credito | rs Who Have | Claims Secured by P | roperty | | | 12/1 |
| nformation. If r | more space is nee | | ried people are filing together, both ional Page, fill it out, number the en | | | ny | |
| | • | s secured by your pr | ` | | | | |
| _ | | | e court with your other schedules. Yo | u have nothing else to repo | rt on this form | | |
| _ | Il in all of the inforr | | ocari wan your outor concedico. To | a nave nearing electic repe | | | |
| - 103.11 | | nation below. | | | | | |
| Part 1: | List All Secured Cl | aims | | | | | _ |
| 2. List all se | cured claims. If a | creditor has more tha | an one secured claim, list the creditor | · separately | Column A | Column A | Column C |
| for each c | laim. If more than | one creditor has a pa | articular claim, list the other creditors all order according to the creditors na | in Part 2. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Citifina | ncial | | Describe the property that secure | es the claim: | \$ <u>3,852.00</u> | <u>\$ 0.00</u> | \$ <u>0.00</u> |
| Creditor's | | | 429 Dante Avenue Glenwood IL | 60425 - Primary | | | |
| 300 Sai | int Paul Pl Street | | Residence | | | | |
| | | | As of the date you file, the claim i | s: Check all that apply. | | | |
| | | | Contingent | er eneer an arat apply. | | | |
| Baltimo | ire | MD 21202 State Zip Code | Unliquidated | | | | |
| • | | | Disputed | | | | |
| Debtor | s the debt? Check o 1 only | ne. | Nature of Lien. Check all that apply An agreement you made (such as | | | | |
| Debtor | • | | car loan) | , mongago on occarou | | | |
| Debtor | 1 and Debtor 2 only | | Statutory lien (such as tax lien, m | echanic's lien) | | | |
| At least | t one of the debtors a | and another | Judgment lien from a lawsuit | | | | |
| Check | if this claim relate | s to a | Other (including a right to offset) | | | | |
| | unity debt was incurred | 2003-2016 | Last 4 digits of account number | 1318 | | | |
| 2.0 | | | Describe the property that secure | | \$ 19,723.00 | \$ 0.00 | \$ 0.00 |
| FORD Creditor's | | | 2013 Ford Explorer with over 33. | | 7 | • | |
| | Box 542000 | | | | | | |
| Number | Street | | | | | | |
| | | | As of the date you file, the claim i | s: Check all that apply. | | | |
| Omaha | | NE 68154 | Contingent Unliquidated | | | | |
| City | | State Zip Code | Disputed | | | | |
| Who owes | s the debt? Check o | ne. | Nature of Lien. Check all that apply | <i>.</i> | | | |
| Debtor | - | | An agreement you made (such as | s mortgage or secured | | | |
| ☐ Debtor | 2 only 1 and Debtor 2 only | | car loan) Statutory lien (such as tax lien, m | ochanic's lion) | | | |
| = | t one of the debtors a | and another | Judgment lien from a lawsuit | conamo a nem | | | |
| _ | | | Other (including a right to offset) | | | | |
| | if this claim relates unity debt | S 10 a | | | | | |
| | was incurred | 2013-05-03 | Last 4 digits of account number | | | | |
| Add the d | dollar value of you | ır entries in Column . | A on this page. Write that number | here: | \$_23,575.00 | | |

Debtor 1 Lavern Phyllis Document Page 19 of 65 Case Number (if known)

| Part | Additional Page After Isiting any er by 2.4, and so forth | | number them beginning with 2.3, followed | Column A Amount of claim Do not deduct the value of collateral | Column A Value of collateral that supports this claim | Column C Unsecured portion If any |
|------|---|----------------------------|---|--|--|-----------------------------------|
| 2.3 | Wells Fargo HM Mortgag | | Describe the property that secures the claim: | \$ <u>125,024.00</u> | \$ <u>0.00</u> | <u>\$ 0.00</u> |
| | Creditor's Name 8480 Stagecoach Cir Number Street | | 429 Dante Avenue Glenwood IL 60425 - Primary Residence | | | |
| | | | As of the date you file, the claim is: Check all that apply. | | | |
| | Frederick City | MD 21701 State Zip Code | Contingent Unliquidated Disputed | | | |
| W | ho owes the debt? Check o | ne. | Nature of Lien. Check all that apply. | | | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim relate community debt | | An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | |
| Da | eto Doht was incurred | 2002-2016 | Last 4 digits of account number 1233 | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$<u>148,599.00</u>

| | | Caso 16 21 | 1422 Doc | 1 Filod 00/20/16 | Entered 09/30/16 18: | 31:02 | Desc Main | |
|---------------------------------------|---|---|---|--|--|--|---------------------------|-------------|
| Fill i | n this inf | formation to identify y | our case: | | 0 of 65 | | | |
| Debi | tor 1 | Lavern | Phyllis | Shatteen | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Deb | tor 2 | | | | | | | |
| (Spou | se, if filing) | First Name | Middle Name | Last Name | | | | |
| Unite | ed States I | Bankruptcy Court for the : | <u>NORTHERN</u> _ Dis | strict of <u>ILLINOIS</u> | | | | |
| Case | e Number | | | (State) | | | Check if | this is an |
| (If kr | nown) | | | | | | amended | d filing |
| Offic | ial Fo | orm 106E/F | | | | | | |
| Sche | ماريام | E/F: Creditor | s Who Have | Unsecured Claims | | | | 12/15 |
| ist the A/B: Proreditor eeded op of a | other pa operty (C rs with pa , copy th ny additi | arty to any executory Official Form 106A/B) artially secured claim | contracts or unexp and on Schedule G s that are listed in out, number the e ur name and case r Y Unsecured Claim | pired leases that could result in a G: Executory Contracts and Unex Schedule D: Creditors Who Have entries in the boxes on the left. At number (if known). | and Part 2 for creditors with NONP claim. Also list executory contract: prired Leases (Official Form 106G). Per Claims Secured by Property. If me tach the Continuation Page to this | s on <i>Schedul</i> Do not inclue ore space is | le | |
| 50 | - | to Part 2. | scearca ciaims ag | juliist you! | | | | |
| Ī | | to Fait 2. | | | | | | |
| | | our priority unsecured | d claims. If a credite | or has more than one priority unse | cured claim, list the creditor separate | elv for each cl | aim. For | |
| ead noi uns | ch claim I npriority a secured o | listed, identify what typ amounts. As much as p claims, fill out the Cont | ne of claim it is. If a possible, list the cla inuation Page of Pa | claim has both priority and nonprion nims in alphabetical order according art 1. If more than one creditor hold | ority amounts, list that claim here and g to the creditor's name. If you have ds a particular claim, list the other cre | show both pomore than two | riority and o priority | |
| (FC | л ап ехрі | iariation of each type c | or ciairii, see tile ilis | structions for this form in the instruc | · | otal claim | Priority | Nonpriority |
| | | | | | | | amount | amount |
| Part | 2: L | ist All of Your NONPRI | ORITY Unsecured C | laims | | | | |
| 3. Do | any cred | ditors have nonpriorit | y unsecured claim | s against you? | | | | |
| | No. You | u have nothing to repo | rt in this part. Subn | mit this form to the court with your | other schedules. | | | |
| | Yes. | | | | | | | |
| nor inc | npriority u luded in F | unsecured claim, list th | e creditor separate e creditor holds a p | ly for each claim. For each claim li | r who holds each claim. If a creditor sted, identify what type of claim it is. ors in Part 3.If you have more than th | Do not list cla | aims already | Total claim |
| 4.1 | AMEX | | | Last 4 digits of account number _ | NULL | | | \$ 0.00 |
| | Creditor's N | | | When was the debt incurred? | 2012-2016 | | | |
| | Number | Street | | | | | | |
| | | | | As of the date you file, the claim is | s: Check all that apply. | | | |
| | Fort Lau | iderdale FL | 33329 | Contingent Unliquidated | | | | |
| w | City | St. the debt? Check one. | ate Zip Code | Disputed | | | | |
| ï | Debtor 1 | | | | | | | |
| Ē | Debtor 2 | 2 only | | Type of NONPRIORITY unsecured | claim: | | | |
| | Debtor 1 | I and Debtor 2 only | | Student loans | | | | |
| | At least | one of the debtors and ar | other | Obligations arising out of a separa | ation agreement or divorce | | | |
| | _ | if this claim relates to a | İ | that you did not report as priority of | | | | |
| Is | | inity debt n subject to offest? | | Debts to pension or profit-sharing | pians, and other similar debts | | | |
| | No | • | | Other. Specify Credit Card or | · Credit Use | | | |
| | Yes | | | | | | | |

| Case 16-3142 | Document Page 21 of 65 | 1ain |
|--|---|------------------|
| First Name Middle | Name Last Name | |
| Part 2: Your NONPRIORITY Unsecure | d Claims - Continuation Page | |
| After listing any entries on this page, num | ber them beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.2 AMEX | Last 4 digits of account number NULL | <u>\$ 504.00</u> |
| Creditor's Name | 2040 2040 | |
| Po Box 297871 | When was the debt incurred? 2012-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| Fort Lauderdale FL 3 | Contingent 3329 | |
| City State Z | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | Other. Specify Credit Card of Credit Ose | |
| 4.3 Barclays BANK Delaware | Last 4 digits of account number NULL | \$ 786.00 |
| Creditor's Name | 0000 0040 | |
| Po Box 8803 | When was the debt incurred? 2006-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| Wilmington DE 44 | Contingent | |
| | 9899 Unliquidated | |
| City State Z Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| ■ No | Other. Specify Credit Card or Credit Use | |
| | Last 4 digits of account number NULL | \$ 830.00 |
| Creditor's Name | | · <u></u> |
| Po Box 982238 | When was the debt incurred? 2015-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| El Paso TX 79 | 9998 Unliquidated | |
| City State Z Who owes the debt? Check one. | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONDDIODITY uncocured claim: | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| At least one of the deptors and another | Obligations ansing out of a separation agreement of divorce | |

Check if this claim relates to a

community debt
Is the claim subject to offest?

Yes

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

| | Case 16-31423 Do | oc 1 Filed 09/30/16 _Entered 09/30/16 18:31:02 Desc Main | |
|-----------|--|---|-------------|
| Debtor 1 | Lavern Phyllis | Bocument Page 22 of 65 Case Number (if known) | |
| | First Name Middle Name | Last Name | _ |
| Part | Your NONPRIORITY Unsecured Claims - C | Continuation Page | |
| After lis | sting any entries on this page, number them b | peginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.5 | BK OF AMER | Last 4 digits of account number NULL | \$ 5,956.00 |
| 4.5 | Creditor's Name | Last 4 digits of account flumber | * <u></u> |
| | Po Box 982238 | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | El Paso TX 79998 | Unliquidated | |
| w | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ē | Debtor 1 and Debtor 2 only | Student loans | |
| Ī | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Ē | Check if this claim relates to a | that you did not report as priority claims | |
| _ | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | s the claim subject to offest? | _ | |
| - | No | Other. Specify Credit Card or Credit Use | |
| 4.6 | Yes Blmdsnb | Last 4 digits of account number NULL | \$ 81.00 |
| 4.0 | Creditor's Name | | • |
| | 9111 Duke Blvd | When was the debt incurred? 2009-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Mason OH 45040 | Unliquidated | |
| W | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| IS | s the claim subject to offest? | Over I'll Overd are Over I'll Have | |
| | ■ No Yes | Other. Specify Credit Card or Credit Use | |
| 4.7 | CAP1/L&T | Last 4 digits of account number NULL | \$_208.00 |
| | Creditor's Name | | |
| | Po Box 30253 | When was the debt incurred? 2014-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Call Later City | Contingent | |
| | Salt Lake City UT 84130 City State Zip Code | Unliquidated | |
| W | /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| IS | s the claim subject to offest? | Credit Card or Credit Llee | |
| F | Yes | Other. Specify Credit Card or Credit Use | |
| | | | |

| Debtor 1 | Case 16-31423 D | oc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main | |
|----------|--|---|--------------------|
| | First Name Middle Name | Last Name | - |
| Par | Your NONPRIORITY Unsecured Claims | - Continuation Page | |
| After li | sting any entries on this page, number them | beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.8 | Capital One | Last 4 digits of account number NULL | \$ 0.00 |
| | Creditor's Name | 2007 2012 | |
| | 26525 N Riverwoods Blvd | When was the debt incurred? 2007-2013 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Mettawa IL 60045 | Contingent | |
| | City State Zip Code | Unliquidated | |
| ٧ | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| I | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| ì | No | Other. Specify Credit Card or Credit Use | |
| Ī | Yes | Other. Specify Oreal Card of Oreal Ose | |
| 4.9 | Capital ONE BANK USA N | Last 4 digits of account number NULL | \$ 3,274.00 |
| | Creditor's Name | 2006 2016 | |
| | 15000 Capital One Dr | When was the debt incurred? 2006-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Richmond VA 23238 | Contingent | |
| | Richmond VA 23238 City State Zip Code | Unliquidated | |
| v | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 18 | s the claim subject to offest? | Credit Cord or Credit Llee | |
| Ī | Yes | Other. Specify Credit Card or Credit Use | |
| 4.10 | CBNA | Last 4 digits of account numberNULL | \$ 818.00 |
| 1.10 | Creditor's Name | | |
| | 50 Northwest Point Road | When was the debt incurred? 2007-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | File Crosses Villages III 20007 | Contingent | |
| | Elk Grove Village IL 60007 | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ť | Debtor 1 and Debtor 2 only | Student loans | |
| Ť | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |

Check if this claim relates to a community debt

Is the claim subject to offest?

No

Yes

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

| Debtor 1 | Case 16-31423 D | oc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Document Page 24 of 65 Case Number (if known) | |
|-----------|--|---|--------------------|
| JODIOI 1 | First Name Middle Name | Last Name | - |
| Part | 2: Your NONPRIORITY Unsecured Claims | Continuation Page | |
| After lis | ting any entries on this page, number them | beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.11 | Chase CARD | Last 4 digits of account number NULL | \$ 758.00 |
| | Creditor's Name | When was the debt incurred? 2014-2016 | |
| | Po Box 15298 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE 19850 | Contingent | |
| | City State Zip Code | Unliquidated | |
| w | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| L | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ļ | Debtor 1 and Debtor 2 only | Student loans | |
| <u> </u> | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a | that you did not report as priority claims | |
| Is | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Officer. Specify | |
| 4.12 | Chase CARD | Last 4 digits of account numberNULL | <u>\$ 799.00</u> |
| | Creditor's Name | When was the debt incurred? 2014-2016 | |
| | Po Box 15298 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE 19850 | Contingent | |
| | City State Zip Code | Unliquidated | |
| W | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| le | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| 13 | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Other. SpecifyCredit Card of Credit Ose | |
| 4.13 | Chase CARD | Last 4 digits of account number NULL | \$ 4,063.00 |
| | Creditor's Name | 2012.0010 | |
| | Po Box 15298 | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE 10050 | Contingent | |
| | Wilmington DE 19850 | Unliquidated | |
| w | City State Zip Code //ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ē | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |

Check if this claim relates to a

community debt
Is the claim subject to offest?

Yes

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Page 25 of 65 Case Number (if known) Document Phyllis Lavern Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Chase MTG \$ 0.00 4.14 Last 4 digits of account number _ Creditor's Name 2002-2006 Po Box 24696 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent OH 43224 Columbus Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Notice Only Yes NULL \$ 1,032.00 CITI Last 4 digits of account number 4.15 Creditor's Name 2014-2016 Po Box 6190 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls 57117 SD Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use Yes CITI NULL \$ 3,099.00 4.16 Last 4 digits of account number Creditor's Name 2012-2016 Po Box 6241 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls 57117 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:

| | Case 16-31423 | Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main | |
|------------|---|---|--------------------|
| Debtor 1 | Lavern Phyllis | Page 26 of 65 (if known) | _ |
| | First Name Middle Name | Last Name | |
| Part : | Your NONPRIORITY Unsecured Claim | ms - Continuation Page | |
| After list | ting any entries on this page, number th | nem beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.17 | CITI | Last 4 digits of account number NULL | \$_3,534.00 |
| | Creditor's Name Po Box 6241 | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| - | | As of the date you file, the claim is: Check all that apply. | |
| | Sioux Falls SD 57117 | Contingent | |
| - | City State Zip Code | Unliquidated | |
| | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| L | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| Is | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Offici. Opening | |
| 4.18 | CITI | Last 4 digits of account number NULL | \$ 6,367.00 |
| | Creditor's Name Po Box 6241 | When was the debt incurred? 2012-2016 | |
| - | Number Street | <u></u> | |
| | | As of the data yeur file the alaim in Check all that apply | |
| - | | As of the date you file, the claim is: Check all that apply. | |
| | Sioux Falls SD 57117 | Contingent | |
| - | City State Zip Code | Unliquidated | |
| WI | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| <u> </u> | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| <u> </u> | Debtor 1 and Debtor 2 only | Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| Is | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | Otton. Opening | |
| 4.19 | Citifinancial | Last 4 digits of account number 1849 | \$ <u>0.00</u> |
| | Creditor's Name 300 Saint Paul Pl | When was the debt incurred? 2003-2014 | |
| - | Number Street | | |
| | | As of the data you file the claim is: Check all that apply | |
| - | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Baltimore MD 21202 | Unliquidated | |
| | City State Zip Code | | |
| WI | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| = | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| = | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| = | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to offest? | La peore to beneficial or broth-enating bigues, and other similar deors | |
| | No | Other. Specify Notice Only | |
| | Yes | | |
| | | | |

| | | c 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main ըրգարաու Page 27 of 65 Case Number (if known) | |
|---------------------------------------|--|--|--------------------|
| Debtor 1 | Lavern Phyllis | | _ |
| | First Name Middle Name | Last Name | |
| Part | Your NONPRIORITY Unsecured Claims - (| ontinuation Page | |
| After lis | sting any entries on this page, number them b | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.20 | COMENITY CAPITAL/HSN | Last 4 digits of account number NULL | \$ <u>1,199.00</u> |
| | Creditor's Name 995 W 122Nd Ave | When was the debt incurred? 2008-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Westminster CO 80234 | Unliquidated | |
| | City State Zip Code | Disputed | |
| W | /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| Ļ | Debtor 2 only | Type of NONPRIORITY unsecured claim: □ | |
| Ļ | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a | that you did not report as priority claims | |
| le | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| ┍ | Yes | Other. Specify Credit Card of Credit Ose | |
| 4.21 | Comenitybank/Trwrdsv | Last 4 digits of account number NULL | \$ 2,887.00 |
| | Creditor's Name | | |
| | 3100 Easton Square PI | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Columbus OH 43219 | Unliquidated | |
| 144 | City State Zip Code | Disputed | |
| W | /ho owes the debt? Check one. | | |
| - | Debtor 1 only | | |
| Ļ | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ļ | Debtor 1 and Debtor 2 only | Student loans | |
| Ļ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a community debt | that you did not report as priority claims | |
| Is | the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Other. Specify Credit Card or Credit Use | |
| F | Yes | Officer. Specify | |
| 4.22 | Mcydsnb | Last 4 digits of account number NULL | \$ 2,441.00 |
| • | Creditor's Name | | |
| | 9111 Duke Blvd | When was the debt incurred? 2009-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Mason OH 45040 | Unliquidated | |
| 141 | City State Zip Code /ho owes the debt? Check one. | Disputed | |
| , , , , , , , , , , , , , , , , , , , | Debtor 1 only | | |
| F | Debtor 1 only | Type of MONDPIORITY uncoured claim: | |
| F | | Type of NONPRIORITY unsecured claim: Student loans | |
| F | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| L | At least one of the debtors and another | Congations anding out of a separation agreement of divorce | |

Check if this claim relates to a

community debt
Is the claim subject to offest?

Yes

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

| Debtor 1 | Lavarra Dhvillia | Ooc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Qocument Page 28 of 65 (If known) | |
|-----------|--|---|--------------------|
| JODIOI I | First Name Middle Name | Last Name | _ |
| Pari | Your NONPRIORITY Unsecured Claims | - Continuation Page | |
| After lis | sting any entries on this page, number then | n beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.23 | Merrick BANK | Last 4 digits of account number NULL | \$ <u>1,400.00</u> |
| | Creditor's Name | When was the debt incurred? 2010-2016 | |
| | Po Box 9201 | When was the debt incurred? 2010-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Old Bethpage NY 11804 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| Ļ | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ļ | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| I | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| Ì | No | Other. Specify Credit Card or Credit Use | |
| Ī | Yes | Other. Specify Orban Sala St. Great Soc | |
| 4.24 | Nordstrom/TD | Last 4 digits of account number NULL | \$ <u>604.00</u> |
| | Creditor's Name | When was the debt incurred? 2013-2016 | |
| | 13531 E Caley Ave | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Englewood CO 90111 | Contingent | |
| | Englewood CO 80111 City State Zip Code | Unliquidated | |
| v | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| IS | s the claim subject to offest? | Overlit Overland Overlittling | |
| Ī | No Yes | Other. Specify Credit Card or Credit Use | |
| 4.25 | Syncb/Amazon | Last 4 digits of account number NULL | \$ 2,428.00 |
| 4.20 | Creditor's Name | | |
| | Po Box 965015 | When was the debt incurred? 2013-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Orlando FL 32896 | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ř | Debtor 1 and Debtor 2 only | Student loans | |
| ř | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | | |

Check if this claim relates to a community debt

Is the claim subject to offest?

No

Yes

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Debts to pension or profit-sharing plans, and other similar debts

| Case | e 16-31423 Do Phyllis | oc 1 Filed 09/30/16 Document | Entered 09/30/16 18:31:02 Page 29 of 65 Case Number (if known) | Desc Main | |
|---|------------------------------|--------------------------------------|--|-----------|------------------|
| First Name | Middle Name | Last Name | | | |
| Part 2: Your NONPRI | ORITY Unsecured Claims - | Continuation Page | | | |
| er listing any entries on | this page, number them | beginning with 4.4, followed by 4.5, | , and so forth. | | Total Claim |
| 26 Syncb/Golfsmith | | Last 4 digits of account number | NULL | | \$ 729.00 |
| Creditor's Name | | - | | | |
| 950 Forrer Blvd | | When was the debt incurred? | 2012-2016 | | |
| Number Street | | | | | |
| | | As of the date you file, the claim | is: Check all that apply. | | |
| Kettering | OH 45420 | Contingent | | | |
| City | State Zip Code | Unliquidated | | | |
| Who owes the debt? | Check one. | Disputed | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | | Type of NONPRIORITY unsecure | ed claim: | | |
| Debtor 1 and Debtor | • | Student loans | | | |
| At least one of the de | ebtors and another | Obligations arising out of a sepa | • | | |
| Check if this claim | relates to a | that you did not report as priority | | | |
| community debt Is the claim subject to | offest? | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| No Yes | | Other. Specify Credit Card | or Credit Use | | |
| 27 Syncb/HH GREGG | 1 | Last 4 digits of account number | NULL | | \$ 955.00 |
| Creditor's Name | | | 0040.0040 | | |
| Po Box 965036 | | When was the debt incurred? | 2012-2016 | | |
| Number Street | | | | | |
| | | As of the date you file, the claim | is: Check all that apply. | | |
| Oderada | FI 00000 | Contingent | | | |
| Orlando | FL 32896 | Unliquidated | | | |
| City Who owes the debt? | State Zip Code Check one. | Disputed | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | | Type of NONPRIORITY unsecure | ed claim: | | |
| Debtor 1 and Debtor | 2 only | Student loans | | | |
| At least one of the de | ebtors and another | Obligations arising out of a sepa | aration agreement or divorce | | |
| Check if this claim | relates to a | that you did not report as priority | y claims | | |
| community debt | " | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| Is the claim subject to | offest? | | - w.v. | | |
| No | | Other. Specify Credit Card | or Credit Use | | |
| Yes Syncb/HOME SHO | PPING | Last 4 digits of account number | NULL | | \$ 0.00 |
| Creditor's Name | | | | | |
| Po Box 965005 | | When was the debt incurred? | 2008-2009 | | |
| Number Street | | | | | |
| | | As of the date you file, the claim | is: Check all that apply. | | |
| - | | Contingent | | | |
| Orlando | FL 32896 | Unliquidated | | | |
| City | State Zip Code | Disputed | | | |
| Who owes the debt? C | SHECK OHE. | ☐ = :======== | | | |
| Debtor 1 only | | T (MONES CONT.) | ad alabas | | |
| Debtor 2 only | | Type of NONPRIORITY unsecure | ea ciaim: | | |

Debtor 1 and Debtor 2 only

Is the claim subject to offest?

community debt

No

Yes

At least one of the debtors and another Check if this claim relates to a

Student loans

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Phyllis Page 30 of 65 Case Number (if known)

| Debtor 1 | Lavern | Phyllis | Language 30 of 65 Case Number (if known) | |
|-----------|-------------------------------|-----------------------------|---|--------------------|
| | First Name | Middle Name | Last Name | |
| Part | Your NONPRIC | ORITY Unsecured Claims - | Continuation Page | |
| After lie | ting any entries on | this page number them | beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| Aiteilis | sting any entires on | tilis page, number them | beginning with 4.4, followed by 4.3, and 50 forth. | rotal olalili |
| 4.29 | Syncb/JCP | | Last 4 digits of account number NULL | \$ <u>2,563.00</u> |
| | Creditor's Name | | 2010.2010 | |
| | Po Box 965007 | | When was the debt incurred? 2012-2016 | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Odende | FI 00000 | Contingent | |
| | Orlando | FL 32896 | Unliquidated | |
| l w | City /ho owes the debt? Ci | State Zip Code heck one. | Disputed | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 | 2 only | Student loans | |
| | At least one of the del | btors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim | relates to a | that you did not report as priority claims | |
| - | community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to | offest? | | |
| | No | | Other. Specify Credit Card or Credit Use | |
| 4.30 | Yes WF CRD SVC | | Last 4 digits of account number NULL | \$ 2,573.00 |
| 4.50 | Creditor's Name | | | * _ |
| | Po Box 14517 | | When was the debt incurred? 2014-2016 | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | | | Contingent | |
| | Des Moines | IA 50306 | Unliquidated | |
| w | City /ho owes the debt? Cl | State Zip Code heck one | Disputed | |
| | Debtor 1 only | | _ | |
| Ī | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| Ī | Debtor 1 and Debtor 2 | 2 only | Student loans | |
| Ī | At least one of the del | btors and another | Obligations arising out of a separation agreement or divorce | |
| ΙĒ | Check if this claim | relates to a | that you did not report as priority claims | |
| _ | community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to | offest? | | |
| | No | | Other. SpecifyCredit Card or Credit Use | |
| | Yes | | | |
| Part | List Others to | o Be Notified for a Debt Th | at You Already Listed | |
| E lles | this nage only if | have others to be notified | I shout your hankruptoy for a dobt that you already listed in Barte 4 or 2. For | |
| | | | I about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For from you for a debt you owe to someone else, list the original creditor in Parts 1 or | |
| | | | you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the | |

additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

_....

Official Form 106E/F

Debtor 1 Lavern

Phyllis

Document

Page 31 of 65 Case Number (if known)

Deptor 1 Laveill

Name Middle Name

Add the Amounts for Each Type of Unsecured Claim

Last Name

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|-----------------------------|---|------------|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | Total claim \$0.00 |
| | 6f. Student loans6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | 0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims6h. Debts to pension or profit-sharing plans, and other | 6g. | \$0.00 \$0.00 |

| Ei | ll in this int | Caso 16 | | Glad 00/20/16 | | ed 09/30/16 18:31:0 | Desc Main | |
|---------------------------|--|---|--|--|--|--|-------------------------------|-------|
| | | ormation to facil | | | | 2 of 65 | | |
| D | ebtor 1 | Lavern First Name | Phyllis Middle Name | Shatteen Last Name | - | | | |
| D | ebtor 2 | | WINGLE WATE | East Name | _ | | | |
| (S | pouse, if filing) | First Name | Middle Name | Last Name | | | | |
| U | nited States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | | | | | |
| | ase Number | | | (State) | | | Check if this | |
| | f known) | | | | | | amended fil | ling |
| <u>Off</u> | icial Fo | orm 106G | | | | | | 12/15 |
| Be as informaddition 1. [| complete mation. If m ional pages oo you hav No. Cho Yes. Fill ist separat | and accurate as nore space is need, write your name any executory eck this box and so in all of the informely each person | possible. If two married people eded, copy the additional page, he and case number (if known). contracts or unexpired leases? Submit this form to the court with mation below even if the contract or company with whom you ha | are filing together, bott fill it out, number the end of the second of t | th are equall entries, and a contries and a contrie | ning else to report on this form. (B: Property (Official Form 106A) what each contract or lease is | p of any /B) s for (for | |
| u | nexpired le | ases. | cell phone). See the instruction | | truction book | let for more examples of executors State what the contract or | | |
| | l erson or | company with w | nom you have the contract of h | - do | | State what the contract of | 16436 13 101 | |
| 2.1 | l | | | | _ | | | |
| | Name | | | | _ | | | |
| | Number | Street | | | | | | |
| | City | | State Zip | Code | _ | | | |
| 2.2 | | | | | | | | |
| | Name | | | | _ | | | |
| | Number | Street | | | _ | | | |
| | City | | State Zip | Code | _ | | | |
| 2.3 | | | | | | | | |
| | Name | | | | _ | | | |
| | Number | Street | | | _ | | | |
| | City | | State Zip v | Code | _ | | | |
| | | | | | | | | |
| 2.4 | | | | | _ | | | |
| | Name | | | | | | | |
| | Number | Street | | | | | | |
| | City | | State Zip | Code | _ | | | |
| 2.5 | | | | | | | | |
| | Name | | | | | | | |
| | Number | Street | | | _ | | | |

State Zip Code

City

Official Form 106G

| Fill in this inf | formation to ident | tify your case: | |
|---------------------|----------------------|---|-----------|
| Debtor 1 | Lavern | Phyllis | Shatteen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | r the : <u>NORTHERN</u> District of <u>IL</u> | |
| Case Number | | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | dditional Pages, write your name an | d case number (if known). Answ | er every question. | | | | | |
|--|---|---------------------------------------|--------------------|---|--|--|--|--|
| 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) | | | | | | | | |
| | No. | | | | | | | |
| | Yes | | | | | | | |
| | lithin the last 8 years, have you lived rizona, California, Idaho, Lousiiana, N | • • • • | - , | unity property states and territories include and Wisconsin.) | | | | |
| | No. Go to line 3. | | | | | | | |
| | Yes. Did your spouse, former spor | use, or legal equivalent live with yo | ou at the time? | | | | | |
| | | e or territory did you live? | Fill in | the name and current address of that person. | | | | |
| | Name of your spouse, former spouse or | legal equivalent | | | | | | |
| | | | | | | | | |
| | Number Street | | | | | | | |
| | City | State | Zip Code | | | | | |
| 3 | chedule E/F, or Schedule G to fill ou | it Column 2. | | Column 2: The creditor to whom you owe the debt | | | | |
| | | | | Check all schedules that apply: | | | | |
| 3.1 | | | | Schedule D, line | | | | |
| | Name | | | Schedule E/F, line | | | | |
| | Number Street | | | Schedule G, line | | | | |
| | City | State | Zip Code | | | | | |
| 3.2 | | | | Schedule D, line | | | | |
| | Name | | | Schedule E/F, line | | | | |
| | Number Street | | | Schedule G, line | | | | |
| | City | State | Zip Code | | | | | |
| 3.3 | | | | Schedule D, line | | | | |
| | Name | | | Schedule E/F, line | | | | |
| | Number Street | | | Schedule G, line | | | | |
| | City | State | Zip Code | | | | | |

| | | | | 01 00 |
|---------------------------|--------------------|----------------------------------|-------------|---|
| Fill in this in | formation to ident | ify your case: | | |
| Debtor 1 | Lavern | Phyllis | Shatteen | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Case Number | | the : <u>NORTHERN DISTRICT C</u> | DF ILLINOIS | Check if this is: |
| (If known) | | | | An amended filing |
| | | | | A supplement showing post-petition |
| | | | | chapter 13 income as of the following dat |
| ۰. | orm 106I | | | |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment | | | | | |
|----|---|---------------------------------|---------------------------|-------------------------------|-----------------------------------|--|
| 1. | Fill in your employment information | Debtor 1 | | Debtor 2 or non-filing spouse | | |
| | If you have more than one job, attach a separate page with information about additional employers. | | X Employed Not employed | | Employed Not employed | |
| | Include part-time, seasonal, or self-employed work. | Occupation | Legal Secretary | | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | Seyfarth-Shaw LL | P | | |
| | | Employers address | 131 S. Dearborn | | | |
| | | | Chicago, IL 60603 | | , | |
| | | | | | | |
| | | How long employed there? | 31 years | | | |
| Pa | rt 2: Give Details About Month | ly Income | | | | |
| | spouse unless you are separated. | ve more than one employer, comb | ine the information for a | | , Ç | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be | | | \$6,893.62 | \$0.00 | |
| 3. | 8. Estimate and list monthly overtime pay. | | | \$0.00 | \$0.00 | |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$6,893.62 | \$0.00 | |
| | | | | | | |

 Official Form 106I
 Record # 716081
 Schedule I: Your Income
 Page 1 of 2

Case 16-31423 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Doc 1 Page 35 of 65

Document Phyllis Lavern Debtor 1 Case Number (if known)

Last Name

First Name

Middle Name

| | | | | For Debtor 1 | | Debtor 2 or filing spouse | | |
|----------------|------------------------|---|----------------------------------|--------------------------|---------|------------------------------|---------------|------------|
| | Copy | line 4 here | 4. | \$6,893.62 | | \$0.00 | | |
| 5. L i | | payroll deductions: | | | | | | |
| | | ax, Medicare, and Social Security deductions | 5a. | \$1,085.26 | | \$0.00 | | |
| | | landatory contributions for retirement plans | 5b. | \$0.00 | | \$0.00 | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. — | \$548.14 | | \$0.00 | | |
| | | Required repayments of retirement fund loans | 5d. | \$740.54 | | \$0.00 | | |
| | | nsurance | 5e. | \$135.70 | | \$0.00 | | |
| | | Omestic support obligations | 5f. _ | \$0.00 | | \$0.00 | | |
| | - | Inion dues | 5g. | \$0.00 | | \$0.00 | | |
| 0.4 | | Other deductions. Specify: | 5h. _ | \$0.00 | | \$0.00 | | |
| | | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. _ = | \$2,509.65 | _ | \$0.00 | | |
| | | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$4,383.97 | | \$0.00 | | |
| 8. Li s | | other income regularly received: | | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 0.00 | | \$ 0.00 | | |
| | | dependent regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. — | \$0.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | _ | | | ••• | | |
| | 8g. | Pension or retirement income | 8g. — | \$0.00 | | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h. — | \$0.00 | | \$0.00 | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$0.00 | | \$0.00 | | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$4,383.97 + | | \$0.00 | : Г | \$4,383.97 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | <u>L</u> | + 1,000.01 | | 40.00 | L | ψ-1,000.01 |
| 11. | Inclu other Do n | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify: | our dependen oot available to | , | | | 11 | \$0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The res | | • | annliac | | 12. | \$4,383.97 |
| 13. | | e that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Ce</i> ou expect an increase or decrease within the year after you file this form | | s anu Reialeu Dala, IT I | applies | | '- <u>'</u> L | Ψ+,505.31 |
| 13. | x I | | | | | | | |

| Fill in this in | formation to identify yo | ur case: | | | | |
|---------------------------------|---|---|--|---|--|-----------------------|
| Debtor 1 | Lavern | Phyllis | Shatteen | Check if this is | : | |
| | First Name | Middle Name | Last Name | An amend | Ū | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | nent showing pos s of the following o | t-petition chapter 13 |
| United States | Bankruptcy Court for the : _ | NORTHERN DISTRICT (| OF ILLINOIS | | | |
| Case Number | Г | | | MM / DD / | / YYYY | |
| | 4001 | | | A separat | e filing for Debtor | 2 because Debtor 2 |
| Official F | orm 106J | | | maintains | a separate house | ehold. |
| Schedul | e J: Your Ex | penses | | | | 12/14 |
| - | - | | | are equally responsible for supply ges, write your name and case nu | - | |
| Part 1: | Describe Your Household | | | | | |
| | Go to line 2. Does Debtor 2 live in a s | separate household? t file a separate Schedu | ıle J. | | | |
| 2. Do you h | nave dependents? | X No | | Dependent's relationship to | Dependent's | Does dependent live |
| Do not lis | st Debtor 1 and | | t this information for | Debtor 1 or Debtor 2 | age | with you? |
| | | each deper | ndent | | | Yes |
| names. | tate the dependents' | | | | | X No |
| | | | | | | Yes |
| | | | | | | X _{No} |
| | | | | | | Yes |
| | | | | | | X No |
| | | | | | | Yes |
| | | | | | | X No |
| | | | | | | Yes |
| - | expenses include es of people other than | X No | | | | |
| yourself | and your dependents? | Yes | | | | |
| Part 2: | Estimate Your Ongoing Mo | onthly Expenses | | | | |
| - | | | | n as a supplement in a Chapter 13 check the box at the top of the fo | = | |
| the applicable | | , p.o., 10 1110 11 11 11 11 11 11 11 11 11 11 1 | . очерношения солошию с, | one on the second of the second | | |
| | • | _ | ance if you know the value · <i>Income</i> (Official Form 106I. | .) | , | Your expenses |
| | | | | | | |
| | for the ground or lot. | xpenses for your resid | lence. Include first mortgage | e payments and | 4. | \$1,099.00 |
| If not inc | cluded in line 4: | | | | | |
| 4a. Re | eal estate taxes | | | | 4a. | \$0.00 |
| 4b. Pro | operty, homeowner's, or | renter's insurance | | | 4b. | \$0.00 |
| 4c. Ho | ome maintenance, repair, | and upkeep expenses | | | 4c. | \$100.00 |
| 4d. Ho | omeowner's association of | r condominium dues | | | 4d. | \$0.00 |

Schedule J: Your Expenses

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Debtor 1 Lavern

First Name

Phyllis

Middle Name

Document

Last Name

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Case Number (if known) __

Your expenses \$193.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$300.00 6a. 6a. Electricity, heat, natural gas \$100.00 6b. Water, sewer, garbage collection \$200.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$500.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$90.00 9. Clothing, laundry, and dry cleaning 10. \$60.00 10. Personal care products and services \$100.00 11. Medical and dental expenses 11. \$650.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$250.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$120.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. 20c. Property, homeowner's, or renter's insurance \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 716081 Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main Document Page 38 of 65

Phyllis Lavern Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$5.00 Postage/Bank Fees (\$5.00), 21. 21. Other. Specify: \$3,767.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$4,383.97 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$3,767.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$616.97 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 716081 Schedule J: Your Expenses Page 3 of 3

| Fill in this in | Fill in this information to identify your case: | | | | |
|---------------------------------------|---|-----------------------------------|---------------------|--|--|
| Debtor 1 | Lavern | Phyllis | Shatteen | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Case Number (If known) | | the : <u>NORTHERN</u> District of | ILLINOIS (State) | | |
| (II KIIOWII) | | | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT | an attorney to help you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read correct. | the summary and schedules filed with this declaration and that they are true and |
| ✗ /s/ Lavern Phyllis Shatteen | × |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 09/26/2016 MM / DD / YYYY | DateMM / DD / YYYY |

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| Fill in this in | formation to ide | | | |
|--|----------------------|------------------------|---------------------|--|
| Debtor 1 | Lavern First Name | Phyllis Middle Name | Shatteen Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the : <u>NORTHERN</u> _ District of _ <u>ILLINOIS</u> (State) | | | | |
| Case Number (If known) | r | | _ | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| num | number (if known). Answer every question. | | | | | | |
|-----|--|-------------------------------|---|-------------------------------|--|--|--|
| | Give Details About Your Marital Status and Where Yo | I hard Bafana | | | | | |
| | 01. What is your current marital status? | | | | | | |
| | | | | | | | |
| | Married | | | | | | |
| | Not married | | | | | | |
| 02 | During the last 3 years, have you lived anywhere other tha | n where you live nov | v? | | | | |
| | No. | , | | | | | |
| | Yes. List all of the places you lived in the last 3 years. Do | not include where ye | ou live now. | | | | |
| | | | | | | | |
| | Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there | | | |
| 03 | Within the last 8 years, did you ever live with a spouse or I | | community property state or territory? (Community | iived there | | | |
| | property states and territories include Arizona, California, and Wisconsin.) | | | | | | |
| | No. | | | | | | |
| | Yes. Make sure you fill out Schedule H: Your Codebtors (| Official Form 106H). | | | | | |
| | | | | | | | |
| | Explain the Sources of Your Income | | | | | | |
| | Explain the doubles of Your modific | | | | | | |
| | | | | | | | |
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Debtor 1 Lavern Phyllis Shatteen Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$62,291 Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$78,402 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, Wages, commissions, \$71.858 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Lavern Phyllis Shatteen Case Number (if known) _ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Was this payment for... Amount you still owe payments FORD CRED Po Box Box \$ 17,938 Monthly \$ 1,785 ■ Mortgage Car 542000 Omaha NE 68154 Credit card Loan repayment Suppliers or vendors Other Wells Fargo HM Mortgag 8480 Monthly \$ 3,294 \$ 121,730 Mortgage Car Stagecoach Cir Frederick MD ☐ Credit card 21701 ☐ Loan repayment Suppliers or vendors Other _ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe

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| Debtor | 1 | Lavern | Phyllis | Shatteen | | Case Number (if know | /n) | |
|--------|------|--|---|-------------------------|--------------------------|--------------------------|-------------------------|------------------------------|
| | | First Name | Middle Name | Last Name | | | | |
| | an i | nsider? | ou filed for bankruptcy, did you | | or transfer any property | on account of a debt the | nat benefited | |
| | Incl | ude payments on | debts guaranteed or cosigned b | by an insider. | | | | |
| | = | No. | | | | | | |
| | Ш | Yes. List all payme | ents to an insider. | | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | | this payment ditor's name |
| Pa | rt 4 | Identify Lega | I actions, Repossessions, and Fo | oreclosures | | | | |
| | | | ou filed for bankruptcy, were yo | | it court action or admi | inistrative proceeding? | | |
| I | List | | ncluding personal injury cases, | | | | oport or custody | |
| | | No. | | | | | | |
| | П | Yes. Fill in the det | ails. | | | | | |
| | _ | | | Nature of the case | Court or | r agency | | Status of the case |
| | | | ou filed for bankruptcy, was and fill in the details below. | y of your property repo | | | zed, or levied? | |
| | | No. Go to line 11 | | | | | | |
| | | Yes. Fill in the info | ormation below. | | | | | |
| | _ | | | | | | | |
| | | - | e you filed for bankruptcy, did payment because you owed a | - | ng a bank or financial i | institution, set off any | amounts from y | our accounts |
| | | No. Go to line 11 | | | | | | |
| | _ | Yes. Fill in the info | ormation below | | | | | |
| | _ | | you filed for bankruptcy, was a | any of your property i | n the possession of a | n assignee for the ben | efit of creditors. | а |
| | | | iver, a custodian, or another o | | | g | , | _ |
| | 1 | No. | | | | | | |
| [| □ ' | Yes. | | | | | | |
| | | | | | | | | |
| | rt 5 | • | Gifts and Contributions | | | | _ | |
| 13 (| Wit | hin 2 years before | you filed for bankruptcy, did | you give any gifts wit | th a total value of more | e than \$600 per persor | 1? | |
| | | No. | | | | | | |
| | | Yes. Fill in the det | ails for each gift. | | | | | |
| 14 1 | Wit | hin 2 years before | you filed for bankruptcy, did | you give any gifts or | contributions with a to | otal value of more thar | \$600 to any cha | arity? |
| | П | No. | | | | | | |
| | _ | Yes. Fill in the det | ails for each gift | | | | | |
| | | | ano tor odori gila | | | | | |
| | | Gifts or contributi total more than \$6 | ions to charities that 600 | Describe what you | contributed | | Date you contributed | Value |
| | | Salem Baptist C | hurch | Money Donations | | 2 | 015-2016 | Average of \$250 a |
| | | Chicago, IL | | | | | | month |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Pa | rt 6 | List Certain L | .osses | | | | | |
| | | | | | | | | |
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Case Number (if known) __

Shatteen

Phyllis

Lavern

| | | First Name | Middle Name | Last Name | | |
|----|--------|--|------------------------|--|--------------------------|---|
| 15 | | iin 1 year before you filed fo bling? | or bankruptcy or sinc | e you filed for bankruptcy, did you lose anything because of t | heft, fire, other dis | easter, or |
| | П١ | No. | | | | |
| | _ | Yes. Fill in the details for each | h gift. | | | |
| | | Describe the property you lo he loss occurred | st and how | Describe any insurance coverage for the loss Include the amount that insurance has paid. List | Date of your loss | Value of property lost |
| | | Hail, storm and wind damage | e to roof and | Covered by homeowner's insurance | 3/3/2016 | \$2,100 |
| | | siding | | | | |
| | | | | | | |
| | | | | | | |
| l | art 7: | List Certain Payments or | Transfers | | | |
| 16 | With | in 1 year before you filed fo | r hankruntev, did vo | ou or anyone else acting on your behalf pay or transfer any pro | porty to anyone y | OII |
| .0 | cons | sulted about seeking bankru | uptcy or preparing a | | | ou |
| | | No. | | | | |
| | | Yes. Fill in the details | | | | |
| | P | Party Contact Info | | Description and value of any property transferred | Date payment or transfer | Amount of payment |
| | | Geraci Law L.L.C. | | | | Payment/Value: |
| | | 55 E. Monroe Street #3400 | | | | \$4,000.00: \$590.00 paid prior to filing, |
| | | Chicago,IL 60603 | | | | balance to be paid through the plan. |
| | | | | | | |
| | | | | | | |
| | P | Party Contact Info | | Description and value of any property transferred | Date payment or transfer | Amount of payment |
| | | Hananwill Credit Counseling | 1 | Credit Counseling Services | 2016 | \$25.00 |
| | | 115 N. Cross St. | | | | |
| | | Robinson, IL 62454 | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 17 | | - | | ou or anyone else acting on your behalf pay or transfer any promake payments to your creditors? | perty to anyone w | /ho |
| | Do n | not include any payment or t | transfer that you list | ed on line 16. | | |
| | 1 | No. | | | | |
| | | Yes. Fill in the details. | | | | |
| 18 | trans | sferred in the ordinary cours | se of your business | | | |
| | Do n | not include gifts and transfe | | as security (such as the granting of a security interest or morte ady listed on this statement. | gage on your prop | erty). |
| | | No. Yes. Fill in the details for each | h gift. | | | |
| | | | | | | |

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| Debtor 1 | | Lavern | Phyllis | Shatteen | Case | Number (if known) | |
|--------------|--------------|--|----------------|--|-------------------------------|--|---|
| | | First Name | Middle Name | Last Name | | | |
| | | in 10 years before you filed ficiary? (These are often c | | otcy, did you transfer any property to protection devices.) | o a self-settled trust or | similar device of which | you are a |
| | Ν | lo. | | | | | |
| | 'Υ | es. Fill in the details for each | ch gift. | | | | |
| Part | : 8: | List Certain Financial Ac | counts, Instr | uments, Safe Deposit Boxes, and Stor | age Units | | |
| So In | old, ıclu | moved, or transferred? de checking, savings, mor | ney market, c | y, were any financial accounts or in | ites of deposit; shares i | | |
| no I | | ies, pension tunas, cooper lo. | atives, assoc | ciations, and other financial institut | ions. | | |
| | ΙY | es. Fill in the details. | | | | | |
| | | | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | _ | ou now have, or did you ha , or other valuables? | ave within 1 y | year before you filed for bankruptcy | , any safe deposit box | or other depository for | securities, |
| | | lo. | | | | | |
| _ L | J ' | es. Fill in the details. | | Who else had access to it? | Describe the conto | ents | Do you still have it? |
| 22 H | ave | you stored property in a s | storage unit o | or place other than your home withi | n 1 year before you file | d for bankruptcy? | |
| | N | lo. | | | | | |
| [| _] | es. Fill in the details. | | | | | |
| | | | | Who else has or had access to it? | Describe the conto | ents | Do you still have it? |
| Part | 6 Qu | Identify Property You Ho | old or Control | for Someone Else | | | nave it: |
| 23 D | о у | | | meone else owns? Include any pro | perty you borrowed from | m, are storing for, or ho | old in trust |
| | | lo. | | | | | |
| L | _ Y | es. Fill in the details. | | Where is the avenues.2 | Deceribe the num | aut. | Value |
| | | <u></u> | | Where is the property? | Describe the prop | erty | Value |
| Part | 10: | Give Details About Envir | ronmental Info | ormation | | | |
| For th | ie p | urpose of Part 10, the follo | wing definiti | ons apply: | | | |
| ha | ızar | dous or toxic substances, | wastes, or m | or local statute or regulation conce naterial into the air, land, soil, surfa the cleanup of these substances, v | ce water, groundwater, | | |
| | | neans any location, facility ised to own, operate, or uti | | as defined under any environment ling disposal sites. | al law, whether you now | v own, operate, or utiliz | e |
| | | = | _ | ronmental law defines as a hazardo entaminant, or similar term. | us waste, hazardous su | ıbstance, toxic | |
| Repor | rt al | I notices, releases, and pro | oceedings th | at you know about, regardless of w | hen they occurred. | | |
| 24 H | as | any governmental unit noti | ified you that | t you may be liable or potentially lia | ble under or in violation | າ of an environmental la | aw? |
| | N | | | | | | |
| ^L | 」 「 | es. Fill in the details. | | Governmental unit | Environmental lav | , if you know it | Date of notice |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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|----------|------------|-------------|-----------|------------------------|
| Debtor 1 | Lavern | Phyllis | Shatteen | Case Number (if known) |
| | First Name | Middle Name | Last Name | |

| 25 | Have you notified any governmental unit of | any release of hazardous material? | | |
|----|--|---|---|---------------------|
| | No. | | | |
| | Yes. Fill in the details. | | | |
| | | Governmental unit | Environmental law, if you know it | Date of notice |
| 26 | Have you been a party in any judicial or adm | ninistrative proceeding under any enviro | nmental law? Include settlements and ord | lers. |
| | No. | | | |
| | Yes. Fill in the details. | | | |
| | | Court or agency | Nature of the case | Status of the case |
| | Give Details About Your Business or C | Connections to Any Business | | |
| | Within 4 years before you filed for bankrupto | - | f the following connections to any busing | 0002 |
| | <u> </u> | a trade, profession, or other activity, eit | - | 555: |
| | | ny (LLC) or limited liability partnership (| | |
| | A partner in a partnership | , (, ,, p, p | , | |
| | ☐ An officer, director, or managing exe | cutive of a corporation | | |
| | ☐ An owner of at least 5% of the voting | or equity securities of a corporation | | |
| | - | | | |
| | No. None of the above applies. Go to Par | | | |
| | Yes. Check all that apply above and fill in | the details below for each business. | | |
| 28 | Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. | cy, did you give a financial statement to | inyone about your business? Include all f | financial |
| | No. | | | |
| | Yes. Fill in the details. | | | |
| | | Date issued | | |
| Pa | ort 12: Sign Below | | | |
| | I have read the answers on this Statement of answers are true and correct. I understand the in connection with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519, and 3571. | at making a false statement, concealing | property, or obtaining money or property | |
| | ★ /s/ Lavern Phyllis Shatteen | × | | |
| | Signature of Debtor 1 | Signature of De | otor 2 | |
| | | | | |
| | Date 09/26/2016 | Date | | |
| | MM / DD / YYYY | MM / D | O / YYYY | |
| ١. | Did you attach additional pages to Your State | ment of Financial Affairs for Individuals | Filing for Bankruptcy (Official Form 107) | > |
| | _ | ment of a manolal amano for manadale | ining for Summapley (Citional Collin Col) | • |
| | No | | | |
| | Yes | | | |
| | Did you pay or agree to pay someone who is | not an attorney to help you fill out bankr | iptcy forms? | |
| | No | | | |
| | Yes. Name of person | | Attach the Bankruptcy Petition Preparer's | Notice, |
| | | | Declaration, and Signature (| Official Form 119). |
| | | | | |

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B2030 (Form 2030) (12/15)

Date: 09/29/2016

Date

United States Bankruptcy Court

| | NORTHERN DISTR | XICT OF ILLINOIS | SEASTERN DIVISIO | JIN | |
|------|--|-------------------------|-------------------------------------|-----------------------|----------|
| [n ı | re | | | | |
| Lav | vern Phyllis Shatteen / Debtor | | Case No: | | |
| | | | Chapter: | Chapter 13 | |
| | DISCLOSURE OF COM | MPENSATION OF A | ATTORNEY FOR DEE | STOR | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(bapensation paid to me within one year before the filing of the dered or to be rendered on behalf of the debtor(s) in contempts. | he petition in bankruj | ptcy, or agreed to be paid | d to me, for service | es |
| | For legal services, I have agreed to accept | \$4,000.00 | | | |
| | Prior to the filing of this statement I have received | \$590.00 | | | |
| | Balance Due | \$3,410.00 | | | |
| 2. | The source of the compensation paid to me was: | | | | |
| | Debtor(s) Other: (specify | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | Debtor(s) Other: (specify | | | | |
| 4. | I have not agreed to share the above-disclosed comp of my law firm. | pensation with any oth | ner person unless they ar | e members and as | sociates |
| 5. | I have agreed to share the above-disclosed compensation of my law firm. A copy of the agreement, together vattached. In return for the above-disclosed fee, I have agreed to remark, including: | with a list of the name | es of the people sharing | in the compensation | |
| | Analysis of the debtor's financial situation, and rend bankruptcy; | dering advice to the d | ebtor in determining who | ether to file a petit | ion in |
| | b. Preparation and filing of any petition, schedules, stat | tements of affairs and | l nlan which may be regi | iired: | |
| | c. Representation of the debtor at the meeting of creditor | | | | of: |
| | d. Representation of the debtor in adversary proceeding | | | nou nourings there | 01, |
| | e. [Other provisions as needed] | 5 | · · · · · · · · · · · · · · · · · · | | |
| 6. | By agreement with the debtor(s), the above-disclosed fee | does not include the | following service: | | |
| | C | CERTIFICATION | | | |
| | I certify that the foregoing is a complete s | | eement or arrangement for | or | |
| | payment to me for representation of the debtor(s) in this | hankruntov proceedii | age | | |

716081 Page 1 of 1 Record #

/s/ Christopher Michael Dyer

Signature of Attorney

Geraci Law L.L.C. Name of law firm

Case 16-31423 Doc 1 File 6 9 (3) (15w LEhtered 09/30/16 18:31:02 Desc Main

National Headquarters: 55 E. Monroe Specificage Chicage Rages 048 0566 925-1313 help@geracilaw.com



Date: 9/14/2016

Consultation Attorney: SAL

Record #: 716-081

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralogal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not perform to the case being filed shall be paid through be Chapter 3 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circuit. These, such as extended evidentiary hearings, contested adversary proceedings or Classes. Any amount not paid appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filling and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts egarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpey is my responsibility. Injury or other claims or property I must disclose any such claims of property I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a file a amendment and obtain authority to be better on pay those claims to the Trustee.

PLAN: The plan payment is estimated to be \$ ______ per month to _______ honths. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Clapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further unders and that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a omestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my may be closed without a discharge, and I will be required to pay a fee to have it reopened.

(Joint Debtor)

all of the funds into my Chapter 13 plan.

Attorney for the Debtor(s)

Representing Geraci Law L

Dated 9/16/2016

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UNITED STATES BANKEY OF COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Mair 3. Personally review with the debtop and signithe completed of the footnotes, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main 2. Inform the debtor that the debtor process per princt Palagred 5 in the 65 as e of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



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- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 16-31423 Doc 1 Filed 09/30/16 Entered 09/30/16 18:31:02 Desc Main (d) Any portion of the retainer that is mether and expectation of the retainer that is mether that it is mether that is mether that it is meth
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



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F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00
- 3. Before signing this agreement, the attorney has received, \$ 590,00 toward the flat fee, leaving a balance due of \$ 3,410,00; and \$ 310,00 for expenses, leaving a balance due for the filing fee of \$ 0,00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 9 130 12016

Signed:

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Lavern Phyllis Shatteen / Debtor | Bankruptcy Docket #: |
|----------------------------------|----------------------|
| | Judge: |

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/26/2016 /s/ Lavern Phyllis Shatteen

Lavern Phyllis Shatteen

X Date & Sign

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^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Lavern

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/26/2016 | /s/ Lavern Phyllis Shatteen | |
|-------------------|------------------------------------|---|
| | Lavern Phyllis Shatteen | |
| Dated: 09/29/2016 | /s/ Christopher Michael Dyer | |
| | Attornev: Christopher Michael Dver | — |

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| Debto | or 1 Lavern | Phyllis S | hatteen Case Num | ber (if known) | | | | |
|-------|---|---|---|---|--|--|--|--|
| | First Name | Middle Name La | sst Name | | | | | |
| | | | | | | | | |
| Par | 16: Answer These Question | s for Reporting Purposes | | | | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts pring as "incurred by an individual No. Go to line 16th Yes. Go to line 17th 16b. Are your debts pring money for a business No. Go to line 16th Yes. Go to line 17th 16c. State the type of debts | narily business debts? Business debts are or investment or through the operation of the bust. | hold purpose." debts that you incurred to obtain usiness or investment. | | | | |
| | Chapter 7? | | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and | | | | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | Chapter 7. Do you estimate that after any exer openses are paid that funds will be available to o | | | | | |
| 18. | How many creditors do | 1 -49 | 1 ,000-5,000 | 25,001-50,000 | | | | |
| | you estimate that you | ☐ 50-99 | 5,001-10,000 | 50,001-100,000 | | | | |
| | owe? | ☐ 100-199 | ☐ 10,001-25,000 | ☐ More than 100,000 | | | | |
| | | 200-999 | | | | | | |
| 19. | How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion | | | | |
| 20. | How much do you | 50-\$50,000 | □ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | | | | |
| 20. | estimate your liabilities | \$50,001-\$100,000 | □ \$10,000,001-\$50 million | □\$1,000,000,001-\$10 billion | | | | |
| | to be? | \$100,001-\$500,000 | □ \$50,000,001-\$100 million | □\$10,000,000,001-\$50 billion | | | | |
| | | □ \$500,001-\$1 million | □ \$100,000,001-\$500 million | ☐ More than \$50 billion | | | | |
| | | — 4 000,001 4 1 mmon | | Two c dan 450 billion | | | | |
| Pari | t 7: Sign Below | | | | | | | |
| Fory | you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | |
| | | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | |
| | | Signature of Debtor 1 | Slatto * | signature of Debtor 2 | | | | |
| | | Executed on : | / DD / YYYY | executed onMM / DD / YYYY | | | | |

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| Fill in this in | nformation to | identify vo | our case: | | | |
|--------------------------|----------------------------|------------------|--------------------------|--|---|-------|
| | | | | | | |
| Debtor 1 | Lavern First Name | : | Phyllis | Shatteen | | |
| Debtor 2 | First Name | | Middle Name | Last Name | | |
| (Spouse, if filing) | First Name | 70.0 | Middle Name | Last Name | | |
| United States | Bankruptcy Co | ourt for the : _ | NORTHERN District of | f ILLINOIS | | |
| Case Numbe | | | | (State) | | |
| (If known) | | | | _ | Check if this is an | |
| | *** | | | | amended filing | |
| | | | | | | |
| Official E | arm 106 | Doo | | | | |
| <u>Official F</u> | | | | | | |
| Declarat | ion Ab | out an | ı İndividual I | Debtor's Schedules | | 12/15 |
| | | | | | | 12/10 |
| f two married p | eople are fili | ng togethe | r, both are equally resp | oonsible for supplying correct informat | tion. | |
| Did you pay | ign Below or agree to p | ay someon | ne who is NOT an attorn | ney to help you fill out bankruptcy forr | ns? | |
| No | | | | | | |
| Yes. N | ame of Perso | on | | | ach Bankruptcy Petition Preparer's Notice, Declaration, and | |
| | | | | Sign | nature (Official Form 119). | |
| | | | | | | |
| | | | | | | |
| | * | | | | | |
| | | | | | | |
| Under penal: correct. | ty of perjury, | I declare th | nat I have read the sum | mary and schedules filed with this dec | claration and that they are true and | |
| | \sim | | Λ | | | |
| · | 71/ | | 1 DA | A = | | |
| Signatura | of Debtor 1 | | Hall | X | | |
| Joignatule | OlDeptori | į | | Signature of Debtor 2 | • | |
| Date : | 100 | 2016 | | Data | | |
| | | | | | | |
| MM | / DD / YYY | / Y | | Date MM / DD / YYYY | | |

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| Debtor 1 | Lavern | Phyllis | Shatteen | Case Number (if known) |
|--|---|--|--------------------------------------|--|
| | First Name | Middle Name | Last Name | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| | | | | |
| | | | | |
| | | | | |
| 05 | | | | |
| ²⁵ Ha | ve you notified any g | overnmental unit of any re | lease of hazardous material? | |
| | No. | | | |
| | Yes. Fill in the details | 5. | | |
| | | Gover | mmental unit | Environmental law, if you know it Date of notice |
| 26 Ha | ve you been a party i | n any judicial or administra | tive proceeding under any envir | onmental law? Include settlements and orders. |
| | No. | | • | |
| | Yes. Fill in the details | i. : | | |
| _ | | Court | or agency | Nature of the case Status of the case |
| | | | | |
| Part 1 | Give Details Abo | ut Your Business or Connect | ions to Any Business | |
| 27 Wit | hin 4 years before yo | ou filed for bankruptcy, did | you own a business or have any | of the following connections to any business? |
| | A sole proprietor | or self-employed in a trade | e, profession, or other activity, ei | ther full-time or part-time |
| | A member of a lin | nited liability company (LL | C) or limited liability partnership | (LLP) |
| | A partner in a par | | • | • |
| | ☐An officer, directo | or, or managing executive | of a corporation | |
| | An owner of at lea | ast 5% of the voting or equ | ity securities of a corporation | |
| _ | No None of the show | e applies. Go to Part 12. | | |
| | | | ails below for each business. | |
| | . so. s. sock all that ap | pry above and militing deca | ills below for each business. | |
| 28 Witi | nin 2 years before yo | u filed for bankruptcy, did | you give a financial statement to | anyone about your business? Include all financial |
| | itutions, creditors, or | rother parties. | | |
| _ | No. | | | |
| Ц | Yes. Fill in the details. | 000000000000000000000000000000000000000 | | |
| 5 | | Date iss | ned | |
| Part 12 | Sign Below | : | | |
| I have | read the answers or | this Statement of Financia | al Affairs and any attachments, a | nd I declare under penalty of perjury that the |
| answ | ers are true and corre | ect. I understand that makin | ng a false statement, concealing | property or obtaining money or property by facul |
| 18 U.S | inection with a bankr S.C. §§ 152, 1341, 151 | uptcy case can result in fir 9, and 3571. | nes up to \$250,000, or imprisonm | ent for up to 20 years, or both. |
| (| | | | |
| | 101/ | $\Im U$ | | , |
| / X / | VIII | Hall | × | |
| | Signature of Debtor 1 | , j | Signature of De | btor 2 |
| ~ | 9 | 040 | | |
| | Date MM / DD / YV | <u>016</u> | Date | |
| | | | WIW / D | D / YYYY |
| Did yo | ou attach additional p | ages to Your Statement of | Financial Affairs for Individuals | Filing for Bankruptcy (Official Form 107)? |
| ■ N | | | | ,, (|
| = | | | | |
| ĽΥ | :3 | | | |
| Did yo | u pay or agree to pay | y someone who is not an a | ttorney to help you fill out bankru | iptcy forms? |
| ■ No | | | | |
| = | s. Name of person | | | |
| " | Name of person _ | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | | | Deciaration, and Signature (Official Form 119). |

DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE: if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
 b. Failure to keep books and records documenting your financial affairs.
 c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
 d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others
 e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
 f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filling fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated: /2016

Lavern Phyllis Shatteen

X Date & Sign

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Lavern Phyllis Shatteen / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 2/2016

Lavern Phyllis Shatteen

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Lavern Phyllis Shatteen

Date: 7 26/2016

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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| Debtor 1 | Lavern First Name | Phyllis Middle Name | Shatteen | Case Number (if known) | | |
|---|----------------------|------------------------|-----------|------------------------|--|--|
| Part 5: | Sign Below | widdle Name | Last Name | | | |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Lavern Phyllis Shatteen | | | | | | |
| | Date: Dated: | 2 <u>6</u> /2016 | | | | |

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Form B 201A, Notice to Consumer Debtor(s)

In re Lavern Phyllis Shatteen / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated. your

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 426/2016

X Date & Sign

Dated: <u>C1 17.6/2016</u>

Attorney: Salvador Gutierrez